

য়ৢৄৄৄৢ৻৺৺ৼয়৾ৼয়৾ৼয়ৼয়৾ৼয়ৼয়

ROYAL GOVERNMENT OF BHUTAN NATIONAL LAND COMMISSION SECRETARIAT THIMPHU: BHUTAN



Date:-

EARNED LEAVE I	ENCASHMENT	FORM
----------------	-------------------	-------------

1.	Name & Emp. ID. No.	i	
2.	Position Title & Sub Level	:	
3.	Basic Salary at the time of application:		
4.	Financial Year	:	
5.	Office attached with	······	
6.	Date of Initial Appointment	:	
		Signature of Applicant	
Rema	rk by the Supervisor:-		
		Signature	
	(This part to be checked &	& verified by the Administrative Assistant, HRD)	
It is ce	ertified that the above applican	t has days of Earned Leave available on	
his/he	r credit as of		
Encas	hment: Recommende	d/Not Recommended	
		Name & Signature	
		Admin. Assistant	

Human Resource Officer

Tel: 336389/321743 / 321745 Fax: 336708/321746 Post Box No. 142

EPABX: 324741 / 321217 / 324259 / 322798